TAAE 2011 - CALL FOR PAPERS!

SUBMISSION DEADLINE - MAY 31, 2010

2011 PRESENTER CONTRACT

On behalf of myself and my co-presenters, should this abstract be selected. I/we agree that:

1. Presenters at the TAAE Conference are not exempt from paying full registration fees.
2. Presentations requiring laptops and laptop projectors must be supplied by presenter(s). **Note: *Laptops/PCs/Projectors Not Provided.***
3. Individuals submitting this proposal and signing this form agrees to receive all conference correspondence and accept responsibility for conveying conference-related information to co-presenters.
4. Appropriate "Releases of Confidential Information" have been obtained for all presenter materials that will be used as a part of this presentation. The responsibility for protecting client confidentiality rests with the presenter(s).
5. Individuals submitting or included within this proposal have agreed to be present in Austin, TX. During the hour and date assigned to this presentation at the 2011 TAAE Conference, and conduct this proposed presentation according to the conditions listed above.

Date:_____

Signature:_____

This form may be duplicated or downloaded at taae.org. Please print neatly or type.

A. FACILITATORS NEEDED

☐ I would be interested in facilitating and in helping to monitor for TAAE.

B. PRESENTER(s) BIO INFORMATION

1.)_____

_____

_____

2.)_____

_____

_____

3.)_____

_____

_____

4.)_____

_____

_____

PLEASE MAIL TO:
TAAE 2011 Conference
1306-A West Anderson Lane
Austin, TX 78757
Phone: 512/454-8626
Fax: 512/454-3036
E-mail: jmccullough@assnmgmt.com

CROWNE PLAZA ♦ AUSTIN, TEXAS

TAAE 2011

21st ANNUAL CONFERENCE

FEBRUARY 3-4-5, 2011 ♦ CROWNE PLAZA ♦ AUSTIN, TEXAS

PLEASE TAKE THE TIME TO SUBMIT YOUR FORM THAT WE CAN PLAN OUR CONFERENCE.
EACH SESSION IS 1 HOUR OR 1.5 HOURS ON REQUEST/APPROVAL.

Submitter/Presenter Name:_____

School Name:_____

Mailing Address:_____

City:_____ **ST:**_____ **Zip:**_____

Phone (Wk):_____ **Phone (Hm):**_____

Cell:_____ **Fax:**_____

E-mail Address (Main Contact):_____

E-mail Addresses of all other Presenters:

E-mail(1):_____

E-mail(2):_____

E-mail(3):_____

E-mail(4):_____

C. CONFERENCE PRESENTATION/SUITABILITY

1. This presentation is most suitable for (check all that apply)

☐ Math	☐ Science	☐ SOL	☐ English
☐ Elementary	☐ Middle School	☐ High School	☐ Chapter 37
☐ School of Choice	☐ Technical	☐ Administrative	☐ Curriculum & Instruction
☐ Discipline Centers	☐ Licensed Professional Counselors		☐ Service Learning
Type of Program:	⇨☐ Information	⇨☐ Application	⇨☐ Instruction

D. PRESENTATION INFORMATION **Please submit an additional form if more than one topic*

2. Title of presentation:_____

_____

3. A brief description or summary of session: (Note: All or part of this description will be used in the conference programs; use attachments if necessary.) TAAE reserves the right to select those presentations that are Curriculum/TAKS based and Provide teachers with skills and information that can be immediately transferred to the classroom.

Session Description:_____

_____

_____

_____

_____

_____

_____

_____***(Please use an additional sheet if needed)***

E. AUDIO/VISUAL - GUIDELINES & INFORMATION

4. Audio/Visuals: (Limit one please.) ***Note: Laptop and/or projectors not provided***

Note: *All rooms will be equipped with screen and power carts for presentations.*

Note: *PowerPoint LCD presentations/equipment/computers must be supplied by Schools or presenters due to high costs.*

INTERNET CONNECTION FOR WEB ACCESS DURING PRESENTATIONS ARE $100.00 AT HOTEL.

I Need/Require: ☐ Overhead ☐ Flipchart ☐ VCR/Monitor ☐ 35mm